## PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE

**Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications

for maintenance fee notif	ications.				•	• 1
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  DARBY & DARBY P.C. P.O. Box 770 Church Street Station New York, New York 10008-0770				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name, (Signature)		
					· · · · · · · · · · · · · · · · · · ·	(Date)
APPLICATION NO.	TION NO. FILING DATE FIF		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	
10/595,365	10/595,365 April 12, 2006		Ienachem Nathan		06727/0204286-US0	8236
TITLE OF INVENTION	N: THREE-DIMEN SMALL ENTITY	ISIONAL THIN-FILM M			TOTAL PROGRAMM	
Patent	yes	\$755.00		ATION FEE	TOTAL FEE(S) DUE	DATE DUE
EXAM	<u>.</u>	ART UNIT		SUBCLASS	\$1,055.00 7	March 23, 2009
T. H. Parsons		1795	CLASS	OODCLASS	J	
Correspondence "Fee Address" in form PTO/SB/4" Use of a Custon  3. ASSIGNEE NAME A PLEASE NOTE: Unke for recordation as set to the correction of the correct	respondence address (o Address form PTO/SB/n dication (or "Fee Addre 7; Rev 03-02 or more rec ner Number is required AND RESIDENCE DAT less an assignee is identificated in 37 CFR 3.11. Co NEE Future Technology Deve e assignee category or categ	attorneys (22) attached. ss" Indication tent) attached. A TO BE PRINTED ON ted below, no assignee dat impletion of this form is N elopment L.P. ories (will not be printed on teleparts)	or agents OR, ame of a single red attorney or egistered paten isted, no name THE PATENT a will appear of OT a substitut (B) RESIDEN Tel Aviv-) the patent):	firm (having as agent) and the attorneys or ag will be printed.  (print or type) in the patent. If the for filing an active (CITY and Vafo, Israel  Individual	a member 2 anames of gents. If no 3	, the document has been filed
4a. The following fee(s)	are enclosed:		b. Payment of	` '		·
X Issue Fee						
Advance Order -	# of Copies		Director is he posit Account l		by charge the required fee(s), 04-0100	or credit any overpayment, to
5. Change in Entity Sta	,	,		····	<del></del>	
a. Applicant clair	ms SMALL ENTITY sta	tus. See 37 CFR 1.27.	b. Applie	ant is no longe	r claiming SMALL ENTITY s	tatus. See 37 CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	Publication Fee (it require	d) will not be accepted from	n anvone other	re-apply any pre than the applica	eviously paid issue fee to the appl nt; a registered attorney or agent	ication identified above. ;; or the assignee or other party in
Authorized Signature	e / Mh	//n			DateN	Iarch 23, 2009
Typed or printed name S. Peter Ludwig				<del></del>	Registration No.	25,351